24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
American Crossroads	
	C C00487363
Check if 24-hour report X 48-hour report New report Amends report filed	I on 04 01 2014
Full Name of Payee	Date of Public Distribution/Dissemination
Main Street Media Group	04 01 2014
Mailing Address P.O. Box 25093	Amount
City.	276922.00
City State Zip Code Alexandria VA 22313	276823.00 Transaction ID : E.001
	Date of Disbursement or Obligation
Purpose of Expenditure TV / Media Placement Category/ Type	03 / 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District:
Thom Tillis Oppose	President State: NC
	ursement For: Primary X General
Per Election for Office Sought 293313.00 2014	Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Chatham Light Media LLC	04 01 2014
Mailing Address P.O. Box 1330	
	Amount
City State Zip Code	16490.00
Stowe VT 05672	Transaction ID : E.002 Date of Disbursement or Obligation
Purpose of Expenditure TV/ Media Production Category/	M - M / D - D / Y - Y - Y
TV / Media Production Type	04 01 2014
Name of Federal Candidate Support Offic	e Sought: House District:
Thom Tillis Oppose	President State: NC
	ursement For: Primary X General
Per Election for Office Sought 293313.00	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	293313.00
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7
(c) TOTAL Independent Expenditures	22222
	293313.00
Under penalty of perjury I certify that the independent expenditures reported herein were not me with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent	
party committee) any political party committee or its agent.	
Caleb Crosby	M / D D / Y Y Y Y
[Electronically Filed] Date Signature	04 01 2014